

Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

2023

Department of the Treasury Internal Revenue Service

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Open to Public Inspection

For calendar year 2023 or tax year beginning , 2023, and ending ,20

CALIFORNIA ARBITRATION INC
555 BRYANT STREET #523
PALO ALTO, CA 94301

A Employer identification number 87-4449875

B Telephone number (see instructions) (650) 308-4716

G Check all that apply: Initial return, Final return, Address change, Initial return of a former public charity, Amended return, Name change

C If exemption application is pending, check here

D 1 Foreign organizations, check here

2 Foreign organizations meeting the 85% test, check here and attach computation

H Check type of organization: Section 501(c)(3) exempt private foundation, Section 4947(a)(1) nonexempt charitable trust, Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here

I Fair market value of all assets at end of year (from Part II, column (c), line 16) \$ 48,257. J Accounting method: Cash, Accrual, Other (specify)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

Table with 5 columns: (a) Revenue and expenses per books, (b) Net investment income, (c) Adjusted net income, (d) Disbursements for charitable purposes. Rows include Revenue (1-12) and Operating and Administrative Expenses (13-27).

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	1 Cash – non-interest-bearing	34,255.	48,257.	48,257.
	2 Savings and temporary cash investments			
	3 Accounts receivable			
	Less: allowance for doubtful accounts			
	4 Pledges receivable			
	Less: allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach sch)			
	Less: allowance for doubtful accounts			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments – U.S. and state government obligations (attach schedule)			
	b Investments – corporate stock (attach schedule)			
	c Investments – corporate bonds (attach schedule)			
	11 Investments – land, buildings, and equipment: basis			
Less: accumulated depreciation (attach schedule)				
12 Investments – mortgage loans				
13 Investments – other (attach schedule)				
14 Land, buildings, and equipment: basis				
Less: accumulated depreciation (attach schedule)				
15 Other assets (describe _____)				
16 <b>Total assets</b> (to be completed by all filers – see the instructions. Also, see page 1, item I)	34,255.	48,257.	48,257.	
<b>Liabilities</b>	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe _____)			
	23 <b>Total liabilities</b> (add lines 17 through 22)	0.	0.	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30.</b> <input checked="" type="checkbox"/>			
	24 Net assets without donor restrictions	34,255.	48,257.	
	25 Net assets with donor restrictions			
	<b>Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30.</b> <input type="checkbox"/>			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
29 <b>Total net assets or fund balances</b> (see instructions)	34,255.	48,257.		
30 <b>Total liabilities and net assets/fund balances</b> (see instructions)	34,255.	48,257.		

**Part III Analysis of Changes in Net Assets or Fund Balances**

1 Total net assets or fund balances at beginning of year – Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	34,255.
2 Enter amount from Part I, line 27a	2	14,002.
3 Other increases not included in line 2 (itemize)	3	
4 Add lines 1, 2, and 3	4	48,257.
5 Decreases not included in line 2 (itemize)	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 29	6	48,257.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P — Purchase D — Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	N/A			
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))	
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.				(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
a				
b				
c				
d				
e				
2	Capital gain net income or (net capital loss) . . . . .	<input type="checkbox"/> If gain, also enter in Part I, line 7 <input type="checkbox"/> If (loss), enter -0- in Part I, line 7		2
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):	If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 . . . . .		3

**Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 — see instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here . . . . . <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary — see instructions)		
b	All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b) . . . . .	1	0.
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) . . . . .	2	0.
3	Add lines 1 and 2 . . . . .	3	0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) . . . . .	4	0.
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	5	0.
6	Credits/Payments:		
a	2023 estimated tax pymts and 2022 overpayment credited to 2023 . . . . .	6a	
b	Exempt foreign organizations — tax withheld at source . . . . .	6b	
c	Tax paid with application for extension of time to file (Form 8868) . . . . .	6c	
d	Backup withholding erroneously withheld . . . . .	6d	
7	Total credits and payments. Add lines 6a through 6d . . . . .	7	0.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached . . . . .	8	
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	9	0.
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	10	
11	Enter the amount of line 10 to be: <b>Credited to 2024 estimated tax</b> . . . . .	11	
	<b>Refunded</b> . . . . .		

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**Part VI-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? .....		X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition .....		X
If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? .....		X
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: <b>(1)</b> On the foundation. \$ <u>0.</u> <b>(2)</b> On foundation managers. \$ <u>0.</u>		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ <u>0.</u>		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? .....		X
If "Yes," attach a detailed description of the activities.		
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .....		X
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? .....		X
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? .....		
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? .....		X
If "Yes," attach the statement required by <i>General Instruction T</i> .		
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? .....		X
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV .....	X	
<b>8a</b> Enter the states to which the foundation reports or with which it is registered. See instructions. <u>CA</u>		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation. ....	X	
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2023 or the tax year beginning in 2023? See the instructions for Part XIII. If "Yes," complete Part XIII.		X
<b>10</b> Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses. .... <u>SEE STATEMENT 4</u>	X	
<b>11</b> At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions .....		X
<b>12</b> Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions .....		X
<b>13</b> Did the foundation comply with the public inspection requirements for its annual returns and exemption application? ... Website address: <u>HTTPS://CALARB.ORG</u>	X	
<b>14</b> The books are in care of <u>DANA WELCH</u> Telephone no. <u>(650) 308-4716</u> Located at <u>555 BRYANT ST, STE. 523 PALO ALTO CA</u> ZIP + 4 <u>94301</u>		
<b>15</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> — check here. .... N/A. <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year. .... <b>15</b> <u>N/A</u>		
<b>16</b> At any time during calendar year 2023, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? .....		X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country		

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**Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
<b>1a</b> During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? .....	1a (1)	X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? .....	1a (2)	X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? .....	1a (3)	X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? .....	1a (4)	X
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? .....	1a (5)	X
(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) .....	1a (6)	X
<b>b</b> If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .....	1b	
<b>c</b> Organizations relying on a current notice regarding disaster assistance, check here .....		<input type="checkbox"/>
<b>d</b> Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2023? .....	1d	X
<b>2</b> Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
<b>a</b> At the end of tax year 2023, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2023? If "Yes," list the years .....	2a	X
20 __ , 20 __ , 20 __ , 20 __		
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement – see instructions.) .....	2b	
<b>c</b> If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. 20 __ , 20 __ , 20 __ , 20 __		
<b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? .....	3a	X
<b>b</b> If "Yes," did it have excess business holdings in 2023 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2023.) .....	3b	
<b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? .....	4a	X
<b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2023? .....	4b	X

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Form 990-PF (2023)

**Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required** (continued)

	Yes	No
<b>5a</b> During the year, did the foundation pay or incur any amount to:		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?		X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?		X
(3) Provide a grant to an individual for travel, study, or other similar purposes?		X
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions		X
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?		X
<b>b</b> If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions	N/A	
<b>c</b> Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>		
<b>d</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d).	N/A	
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.		X
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		X
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	
<b>8</b> Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?		X

**Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

**1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 5		0.	0.	0.

**2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

**Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** (continued)

**3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE ----- -----		
----- -----		
----- -----		
----- -----		
----- -----		
<b>Total</b> number of others receiving over \$50,000 for professional services .....		<b>0</b>

**Part VIII-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 N/A ----- -----	
2 ----- -----	
3 ----- -----	
4 ----- -----	

**Part VIII-B Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

	Amount	
1 N/A ----- -----		
2 ----- -----		
All other program-related investments. See instructions. 3 ----- -----		
<b>Total.</b> Add lines 1 through 3 .....		<b>0.</b>

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**Part IX** **Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b> Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b> Average monthly fair market value of securities.....	<b>1a</b>	
<b>b</b> Average of monthly cash balances.....	<b>1b</b>	38,053.
<b>c</b> Fair market value of all other assets (see instructions).....	<b>1c</b>	
<b>d Total</b> (add lines 1a, b, and c).....	<b>1d</b>	38,053.
<b>e</b> Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).....	<b>1e</b>	0.
<b>2</b> Acquisition indebtedness applicable to line 1 assets.....	<b>2</b>	0.
<b>3</b> Subtract line 2 from line 1d.....	<b>3</b>	38,053.
<b>4</b> Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions).....	<b>4</b>	571.
<b>5 Net value of noncharitable-use assets.</b> Subtract line 4 from line 3.....	<b>5</b>	37,482.
<b>6 Minimum investment return.</b> Enter 5% (0.05) of line 5.....	<b>6</b>	1,874.

**Part X** **Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here  and do not complete this part.)

<b>1</b> Minimum investment return from Part IX, line 6.....	<b>1</b>	1,874.
<b>2a</b> Tax on investment income for 2022 from Part V, line 5.....	<b>2a</b>	
<b>b</b> Income tax for 2022. (This does not include the tax from Part V.).....	<b>2b</b>	
<b>c</b> Add lines 2a and 2b.....	<b>2c</b>	
<b>3</b> Distributable amount before adjustments. Subtract line 2c from line 1.....	<b>3</b>	1,874.
<b>4</b> Recoveries of amounts treated as qualifying distributions.....	<b>4</b>	
<b>5</b> Add lines 3 and 4.....	<b>5</b>	1,874.
<b>6</b> Deduction from distributable amount (see instructions).....	<b>6</b>	
<b>7 Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1.....	<b>7</b>	1,874.

**Part XI** **Qualifying Distributions** (see instructions)

<b>1</b> Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b> Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26.....	<b>1a</b>	2,500.
<b>b</b> Program-related investments – total from Part VIII-B.....	<b>1b</b>	
<b>2</b> Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.....	<b>2</b>	
<b>3</b> Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b> Suitability test (prior IRS approval required).....	<b>3a</b>	
<b>b</b> Cash distribution test (attach the required schedule).....	<b>3b</b>	
<b>4 Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part XII, line 4.....	<b>4</b>	2,500.

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**Part XII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2022	(c) 2022	(d) 2023
<b>1</b> Distributable amount for 2023 from Part X, line 7 .....				1,874.
<b>2</b> Undistributed income, if any, as of the end of 2023:				
<b>a</b> Enter amount for 2022 only .....			1,063.	
<b>b</b> Total for prior years: 20 __, 20 __, 20 __ .....		0.		
<b>3</b> Excess distributions carryover, if any, to 2023:				
<b>a</b> From 2018 .....				
<b>b</b> From 2019 .....				
<b>c</b> From 2020 .....				
<b>d</b> From 2021 .....				
<b>e</b> From 2022 .....				
<b>f</b> Total of lines 3a through e .....	0.			
<b>4</b> Qualifying distributions for 2023 from Part XI, line 4: \$ 2,500.				
<b>a</b> Applied to 2022, but not more than line 2a ..			1,063.	
<b>b</b> Applied to undistributed income of prior years (Election required – see instructions) .....		0.		
<b>c</b> Treated as distributions out of corpus (Election required – see instructions) .....	0.			
<b>d</b> Applied to 2023 distributable amount .....				1,437.
<b>e</b> Remaining amount distributed out of corpus ..	0.			
<b>5</b> Excess distributions carryover applied to 2023 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5. ....	0.			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b .....		0.		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed .....		0.		
<b>d</b> Subtract line 6c from line 6b. Taxable amount – see instructions .....		0.		
<b>e</b> Undistributed income for 2022. Subtract line 4a from line 2a. Taxable amount – see instructions .....			0.	
<b>f</b> Undistributed income for 2023. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2024 .....				437.
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required – see instructions) .....	0.			
<b>8</b> Excess distributions carryover from 2018 not applied on line 5 or line 7 (see instructions) ..	0.			
<b>9</b> Excess distributions carryover to 2024. Subtract lines 7 and 8 from line 6a .....	0.			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2019 .....				
<b>b</b> Excess from 2020 .....				
<b>c</b> Excess from 2021 .....				
<b>d</b> Excess from 2022 .....				
<b>e</b> Excess from 2023 .....				

**Part XIII Private Operating Foundations** (see instructions and Part VI-A, question 9) N/A

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2023, enter the date of the ruling

**b** Check box to indicate whether the foundation is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

	Tax year				(e) Total
	(a) 2023	(b) 2022	(c) 2021	(d) 2020	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed					
<b>b</b> 85% (0.85) of line 2a					
<b>c</b> Qualifying distributions from Part XI, line 4, for each year listed					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon:					
<b>a</b> "Assets" alternative test – enter:					
<b>(1)</b> Value of all assets					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test – enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed					
<b>c</b> "Support" alternative test – enter:					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XIV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year – see instructions.)**

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)  
 NONE

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.  
 NONE

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed:  
 SEE STATEMENT 6

**b** The form in which applications should be submitted and information and materials they should include:  
 SEE STATEMENT FOR LINE 2A

**c** Any submission deadlines:  
 SEE STATEMENT FOR LINE 2A

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:  
 SEE STATEMENT FOR LINE 2A

**Part XIV Supplementary Information** (continued)

**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<i>a Paid during the year</i>				
IRIS NG 12 MARINA BLVD. MARINA BAY FINANCIA SINGAPORE DBS ASIA CENTRAL 018982 SINGAPORE	N/A	I	COMPLIMENTARY EDUCATIONAL PROGRAMMING ON INTERNATIONAL ARBITRATION AND ADR.	2,500.
<b>Total</b> .....				<b>3a</b> 2,500.
<i>b Approved for future payment</i>				
<b>Total</b> .....				<b>3b</b>

Part XV-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Table with 5 main columns: (a) Business code, (b) Amount, (c) Exclusion code, (d) Amount, (e) Related or exempt function income. Rows include Program service revenue, Fees and contracts from government agencies, Membership dues and assessments, Interest on savings and temporary cash investments, Dividends and interest from securities, Net rental income or (loss) from real estate, Net rental income or (loss) from personal property, Other investment income, Gain or (loss) from sales of assets other than inventory, Net income or (loss) from special events, Gross profit or (loss) from sales of inventory, Other revenue, Subtotal, and Total.

(See worksheet in line 13 instructions to verify calculations.)

Part XV-B Relationship of Activities to the Accomplishment of Exempt Purposes

Table with 2 columns: Line No., Explain below how each activity for which income is reported in column (e) of Part XV-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.)

**Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations**

	Yes	No
<b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of:		
<b>(1)</b> Cash		X
<b>(2)</b> Other assets		X
<b>b</b> Other transactions:		
<b>(1)</b> Sales of assets to a noncharitable exempt organization		X
<b>(2)</b> Purchases of assets from a noncharitable exempt organization		X
<b>(3)</b> Rental of facilities, equipment, or other assets		X
<b>(4)</b> Reimbursement arrangements		X
<b>(5)</b> Loans or loan guarantees		X
<b>(6)</b> Performance of services or membership or fundraising solicitations		X
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees		X

**d** If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
N/A			

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?  Yes  No

**b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

**Sign Here** \_\_\_\_\_ Date \_\_\_\_\_ Title **PRESIDENT**

Signature of officer or trustee

May the IRS discuss this return with the preparer shown below? See instructions.  Yes  No

**Paid Preparer Use Only**

Print/Type preparer's name	Preparer's signature	Date	Check <input checked="" type="checkbox"/> if self-employed	PTIN
BENJAMIN BLOIS				P01441002
Firm's name	Firm's EIN		84-4289784	
Firm's address	31822 VILLAGE CENTER RD., STE. 107 WESTLAKE VILLAGE, CA 91361		Phone no. 805-500-6446	

## CALIFORNIA ARBITRATION INC

87-4449875

**STATEMENT 1**  
**FORM 990-PF, PART I, LINE 16B**  
**ACCOUNTING FEES**

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BANK FEES.....	\$ 53.			
STRIPE.....	821.			
TOTAL	<u>\$ 874.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>

**STATEMENT 2**  
**FORM 990-PF, PART I, LINE 16C**  
**OTHER PROFESSIONAL FEES**

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MANAGEMENT FEES.....	\$ 9,677.			
MARKETING.....	499.			
MARKETING CONSULTANT.....	2,750.			
TAX PREP.....	400.			
TOTAL	<u>\$ 13,326.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>

**STATEMENT 3**  
**FORM 990-PF, PART I, LINE 23**  
**OTHER EXPENSES**

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
AWARDS.....	\$ 127.			
INSURANCE.....	1,152.			
OFFICE EXPENSE.....	638.			
SOFTWARE SUBSCRIPTIONS.....	3,061.			
WEBSITE EXPENSE.....	1,214.			
TOTAL	<u>\$ 6,192.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>

**STATEMENT 4**  
**FORM 990-PF, PART VI-A, LINE 10**  
**SUBSTANTIAL CONTRIBUTORS DURING THE TAX YEAR**

NAME OF SUBSTANTIAL CONTRIBUTOR	ADDRESS OF SUBSTANTIAL CONTRIBUTOR
CALIFORNIA LAWYERS ASSOCIATION	400 CAPITOL MALL, SUITE 650 SACRAMENTO, CA 95814

## CALIFORNIA ARBITRATION INC

87-4449875

**STATEMENT 5**  
**FORM 990-PF, PART VII, LINE 1**  
**LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES**

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED</u>	<u>COMPEN- SATION</u>	<u>CONTRI- BUTION TO EBP &amp; DC</u>	<u>EXPENSE ACCOUNT/ OTHER</u>
DANA WELCH 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	PRESIDENT 2.00	\$ 0.	\$ 0.	\$ 0.
LAURA ABRAHAMSON 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	VICE PRESIDENT 2.00	0.	0.	0.
JEFFERY DAAR 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	VICE PRESIDENT 2.00	0.	0.	0.
BRODY GREENWALD 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	TREASURER 2.00	0.	0.	0.
GIORGIA SASSINE 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	SECRETARY 2.00	0.	0.	0.
MARCUS QUINTANILLA 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	DIRECTOR 0	0.	0.	0.
GHADA QAISI AUDI 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	DIRECTOR 0	0.	0.	0.
GARY BENTON 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	DIRECTOR 0	0.	0.	0.
DANIEL KOLKEY 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	CHAIRMAN 0	0.	0.	0.
CEDRIC CHAO 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	DIRECTOR 0	0.	0.	0.
RUTH V. GLICK 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	DIRECTOR 0	0.	0.	0.
SALLY HARPOE 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	DIRECTOR 0	0.	0.	0.

## CALIFORNIA ARBITRATION INC

87-4449875

**STATEMENT 5 (CONTINUED)**  
**FORM 990-PF, PART VII, LINE 1**  
**LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES**

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
NILUFAR HOSSAIN 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	DIRECTOR 0	\$ 0.	\$ 0.	\$ 0.
NELI POPOVIC 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	DIRECTOR 0		0.	0.
BARBARA REEVES 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	DIRECTOR 0		0.	0.
STEVEN L. SMITH 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	DIRECTOR 0		0.	0.
NICOLAS WIEGAND 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	DIRECTOR 0		0.	0.
		TOTAL \$	<u>0.</u>	<u>\$ 0.</u>
			<u>\$ 0.</u>	<u>\$ 0.</u>

**STATEMENT 6**  
**FORM 990-PF, PART XIV, LINE 2A-D**  
**APPLICATION SUBMISSION INFORMATION**

NAME OF GRANT PROGRAM: CALIFORNIA ARBITRATION INC  
NAME: CALIFORNIA ARBITRATION INC  
CARE OF:  
STREET ADDRESS: 555 BRYANT STREET, SUITE 523  
CITY, STATE, ZIP CODE: PALO ALTO, CA 94301  
TELEPHONE: (650) 308-4716  
E-MAIL ADDRESS: INFO@CALARB.ORG  
FORM AND CONTENT: ADMINISTRATION COSTS  
SUBMISSION DEADLINES: ADMINISTRATION COSTS  
RESTRICTIONS ON AWARDS: ADMINISTRATION COSTS



**AVERAGE MONTHLY CASH BALANCES  
FORM 990-PF, PART IX, LINE 1B**

CASH BAL.	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER
AVERAGES	<u>34,363</u>	<u>35,875</u>	<u>38,897</u>	<u>39,501</u>	<u>37,872</u>	<u>36,689</u>	<u>35,972</u>	<u>35,466</u>	<u>33,687</u>	<u>37,162</u>	<u>44,024</u>	<u>47,125</u>
TOTALS	<u>456,633</u>	NUMBER OF MONTHS		<u>12</u>								
AVERAGE MONTHLY CASH BALANCES	<u>38,053</u>											

Date Accepted \_\_\_\_\_

DO NOT MAIL THIS FORM TO THE FTB

TAXABLE YEAR

# California e-file Return Authorization for Exempt Organizations

FORM

2023

8453-EO

Exempt Organization name <b>CALIFORNIA ARBITRATION INC</b>	Identifying number <b>87-4449875</b>
---	---

### Part I Electronic Return Information (whole dollars only)

1 Total gross receipts or unrelated business taxable income (Form 199, line 4 or Form 109, line 5).....	1	36,894.
2 Total gross income or total tax (Form 199, line 8 or Form 109, line 14).....	2	36,894.
3 Total expenses and disbursements (Form 199, line 9).....	3	22,892.
4 Tax due (Form 109, line 23).....	4	
5 Overpayment (Form 109, line 24).....	5	

### Part II Settle Your Account Electronically for Taxable Year 2023

6  Direct Deposit of refund (Form 109 only.)

7  Electronic funds withdrawal    7a Amount \_\_\_\_\_    7b Withdrawal date (mm/dd/yyyy) \_\_\_\_\_

### Part III Schedule of Estimated Tax Payments for Taxable Year 2024 (These are NOT installment payments for the current amount the exempt organization owes.)

	First Payment	Second Payment	Third Payment	Fourth Payment
8 Amount				
9 Withdrawal Date				

### Part IV Banking Information (Have you verified the exempt organization's banking information?)

10 Routing number \_\_\_\_\_

11 Account number \_\_\_\_\_    12 Type of account:  Checking     Savings

### Part V Declaration of Officer

I authorize the exempt organization's account to be settled as designated in Part II. If I check Part II, box 6, I declare that the bank account specified in Part IV for the direct deposit refund agrees with the authorization stated on my return. If I check Part II, box 7, I authorize an electronic funds withdrawal for the amount listed on line 7a and any estimated payment amounts listed on Part III, line 8 from the bank account specified in Part IV.

Under penalties of perjury, I declare that I am an officer of the above exempt organization and that the information I provided to my electronic return originator (ERO), transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines of the exempt organization's 2023 California electronic return. To the best of my knowledge and belief, the exempt organization's return is true, correct, and complete. If the exempt organization is filing a balance due return, I understand that if the Franchise Tax Board (FTB) does not receive full and timely payment of the exempt organization's tax liability, the exempt organization will remain liable for the tax liability and all applicable interest and penalties. I authorize the exempt organization return and accompanying schedules and statements be transmitted to the FTB by the ERO, transmitter, or intermediate service provider. If the processing of the exempt organization's return or refund is delayed, I authorize the FTB to disclose to the ERO or intermediate service provider the reason(s) for the delay or the date when the refund was sent.

**Sign Here**    Signature of officer: \_\_\_\_\_    Date: \_\_\_\_\_    Title: **PRESIDENT**

### Part VI Declaration of Electronic Return Originator (ERO) and Paid Preparer. See instructions.

I declare that I have reviewed the above exempt organization's return and that the entries on form FTB 8453-EO are complete and correct to the best of my knowledge. (If I am only an intermediate service provider, I understand that I am not responsible for reviewing the exempt organization's return. I declare, however, that form FTB 8453-EO accurately reflects the data on the return.) I have obtained the organization officer's signature on form FTB 8453-EO before transmitting this return to the FTB. I have provided the organization officer with a copy of all forms and information that I will file with the FTB, and I have followed all other requirements described in FTB Pub. 1345, 2023 Handbook for Authorized e-file Providers. I will keep form FTB 8453-EO on file for **four** years from the due date of the return or **four** years from the date the exempt organization return is filed, whichever is later, and I will make a copy available to the FTB upon request. If I am also the paid preparer, under penalties of perjury, I declare that I have examined the above exempt organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

<b>ERO Must Sign</b>	ERO's signature	▶ BENJAMIN BLOIS	Date	Check if also paid preparer <input checked="" type="checkbox"/>	Check if self-employed <input checked="" type="checkbox"/>	ERO's PTIN	P01441002
	Firm's name (or yours if self-employed) and address	▶ BLOIS ACCOUNTING SERVICES 31822 VILLAGE CENTER RD., STE. 107 WESTLAKE VILLAGE CA			Firm's FEIN	84-4289784	
					ZIP code	91361	

Under penalties of perjury, I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

<b>Paid Preparer Must Sign</b>	Paid preparer's signature	▶ _____	Date	Check if self-employed <input type="checkbox"/>	Paid preparer's PTIN
	Firm's name (or yours if self-employed) and address	▶ _____			Firm's FEIN

California Exempt Organization Annual Information Return

Calendar Year 2023 or fiscal year beginning (mm/dd/yyyy) and ending (mm/dd/yyyy)
Corporation/Organization name: CALIFORNIA ARBITRATION INC
California corporation number: 4830517
FEIN: 87-4449875
Street address (suite or room): 555 BRYANT STREET #523
City: PALO ALTO
State: CA
ZIP code: 94301

A First return... B Amended return... C IRC Section 4947(a)(1) trust... D Final information return... E Check accounting method... F Federal return filed... G Is this a group filing?... H Is this organization in a group exemption... I Did the organization have any changes to its guidelines... J If exempt under R&TC Section 23701d... K Is the organization exempt under R&TC Section 23701g?... L Is the organization a limited liability company?... M Did the organization file Form 100 or Form 109... N Is the organization under audit... O Is federal Form 1023/1024 pending?

Part I Complete Part I unless not required to file this form. See General Information B and C.

Table with 16 rows for Receipts and Revenues, Expenses, and Payments. Row 1: Gross sales or receipts from other sources. Row 2: Gross dues and assessments from members and affiliates. Row 3: Gross contributions, gifts, grants, and similar amounts received. Row 4: Total gross receipts for filing requirement test. Row 5: Cost of goods sold. Row 6: Cost or other basis, and sales expenses of assets sold. Row 7: Total costs. Row 8: Total gross income. Row 9: Total expenses and disbursements. Row 10: Excess of receipts over expenses and disbursements. Row 11: Total payments. Row 12: Use tax. Row 13: Payments balance. Row 14: Use tax balance. Row 15: Penalties and interest. Row 16: Balance due.

Sign Here: Under penalties of perjury, I declare that I have examined this return... Signature of officer: PRESIDENT
Paid Preparer's Use Only: Preparer's signature, Date, Check if self-employed, Firm's name and address: BLOIS ACCOUNTING SERVICES, 31822 VILLAGE CENTER RD., STE. 107, WESTLAKE VILLAGE, CA 91361

CACA1112L 01/02/24

**Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts – complete Part II or furnish substitute information.**

<b>Receipts from Other Sources</b>	1	Gross sales or receipts from all business activities. See instructions.	●	1	
	2	Interest	●	2	
	3	Dividends	●	3	
	4	Gross rents	●	4	
	5	Gross royalties	●	5	
	6	Gross amount received from sale of assets (See instructions)	●	6	
	7	Other income. Attach schedule	●	7	
	8	<b>Total</b> gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1		8	
<b>Expenses and Disbursements</b>	9	Contributions, gifts, grants, and similar amounts paid. Attach schedule. <b>SEE STATEMENT 1</b>	●	9	2,500.
	10	Disbursements to or for members	●	10	
	11	Compensation of officers, directors, and trustees. Attach schedule. <b>SEE STMT 2</b>	●	11	0.
	12	Other salaries and wages	●	12	
	13	Interest	●	13	
	14	Taxes	●	14	
	15	Rents	●	15	
	16	Depreciation and depletion (See instructions)	●	16	
	17	Other expenses and disbursements. Attach schedule. <b>SEE STATEMENT 3</b>	●	17	20,392.
	18	<b>Total</b> expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9		18	22,892.

<b>Schedule L Balance Sheet</b>		<b>Beginning of taxable year</b>		<b>End of taxable year</b>	
		<b>(a)</b>	<b>(b)</b>	<b>(c)</b>	<b>(d)</b>
<b>Assets</b>					
1	Cash		34,255.	●	48,257.
2	Net accounts receivable			●	
3	Net notes receivable			●	
4	Inventories			●	
5	Federal and state government obligations			●	
6	Investments in other bonds			●	
7	Investments in stock			●	
8	Mortgage loans			●	
9	Other investments. Attach schedule			●	
10 a	Depreciable assets				
b	Less accumulated depreciation				
11	Land			●	
12	Other assets. Attach schedule			●	
13	<b>Total assets</b>		34,255.		48,257.
<b>Liabilities and net worth</b>					
14	Accounts payable			●	
15	Contributions, gifts, or grants payable			●	
16	Bonds and notes payable			●	
17	Mortgages payable			●	
18	Other liabilities. Attach schedule				
19	Capital stock or principal fund		34,255.	●	48,257.
20	Paid-in or capital surplus. Attach reconciliation			●	
21	Retained earnings or income fund			●	
22	<b>Total liabilities and net worth</b>		34,255.		48,257.

**Schedule M-1 Reconciliation of income per books with income per return**  
Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000.

1	Net income per books	●	7	Income recorded on books this year not included in this return. Attach schedule	●
2	Federal income tax	●	8	Deductions in this return not charged against book income this year. Attach schedule	●
3	Excess of capital losses over capital gains	●	9	Total. Add line 7 and line 8	
4	Income not recorded on books this year. Attach schedule	●	10	Net income per return. Subtract line 9 from line 6	
5	Expenses recorded on books this year not deducted in this return. Attach schedule	●			
6	Total. Add line 1 through line 5				

## CALIFORNIA ARBITRATION INC

87-4449875

**STATEMENT 1**  
**FORM 199, PART II, LINE 9**  
**CONTRIBUTIONS, GIFTS, GRANTS, AND SIMILAR AMOUNTS PAID**

CLASS OF ACTIVITY: N/A  
 DONEE'S NAME - IND IRIS NG  
 DONEE'S STREET ADDRESS - FOREIGN 12 MARINA BLVD. MARINA BAY FINANCIA  
 DONEE'S CITY - FOREIGN SINGAPORE  
 DONEE'S REGION DBS ASIA CENTRAL  
 DONEE'S COUNTRY SINGAPORE  
 DONEE'S POSTAL CODE 018982  
 RELATIONSHIP OF DONEE: N/A  
 ORGANIZATIONAL STATUS OF DONEE: N/A  
 CASH AND NONCASH AMOUNT: \$ 2,500.

TOTAL \$ 2,500.

**STATEMENT 2**  
**FORM 199, PART II, LINE 11**  
**COMPENSATION OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES**

**CURRENT OFFICERS:**

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	TOTAL COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
DANA WELCH 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	PRESIDENT 2.00	\$ 0.	\$ 0.	\$ 0.
LAURA ABRAHAMSON 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	VICE PRESIDENT 2.00	0.	0.	0.
JEFFERY DAAR 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	VICE PRESIDENT 2.00	0.	0.	0.
BRODY GREENWALD 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	TREASURER 2.00	0.	0.	0.
GIORGIA SASSINE 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	SECRETARY 2.00	0.	0.	0.
MARCUS QUINTANILLA 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	DIRECTOR 0	0.	0.	0.
GHADA QAISI AUDI 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	DIRECTOR 0	0.	0.	0.

## CALIFORNIA ARBITRATION INC

87-4449875

## STATEMENT 2 (CONTINUED)

FORM 199, PART II, LINE 11

## COMPENSATION OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES

## CURRENT OFFICERS:

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	TOTAL COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
GARY BENTON 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	DIRECTOR 0	\$ 0.	\$ 0.	\$ 0.
DANIEL KOLKEY 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	CHAIRMAN 0	0.	0.	0.
CEDRIC CHAO 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	DIRECTOR 0	0.	0.	0.
RUTH V. GLICK 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	DIRECTOR 0	0.	0.	0.
SALLY HARPOE 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	DIRECTOR 0	0.	0.	0.
NILUFAR HOSSAIN 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	DIRECTOR 0	0.	0.	0.
NELI POPOVIC 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	DIRECTOR 0	0.	0.	0.
BARBARA REEVES 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	DIRECTOR 0	0.	0.	0.
STEVEN L. SMITH 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	DIRECTOR 0	0.	0.	0.
NICOLAS WIEGAND 555 BRYANT ST., STE. 523 PALO ALTO, CA 94301	DIRECTOR 0	0.	0.	0.
		TOTAL \$ 0.	\$ 0.	\$ 0.

STATEMENT 3  
FORM 199, PART II, LINE 17  
OTHER EXPENSES

ACCOUNTING FEES.....	\$	874.
AWARDS.....		127.
INSURANCE.....		1,152.
OFFICE EXPENSE.....		638.
OTHER PROFESSIONAL FEES.....		13,326.
SOFTWARE SUBSCRIPTIONS.....		3,061.
WEBSITE EXPENSE.....		1,214.
TOTAL	\$	<u>20,392.</u>